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An Essay

on

Gastritis

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by

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The important station the Stomach holds in the animal Economy, renders the Study of its diseases most interesting to the physician and useful to mankind: Situated in the Centre of the System all nervous sensation is felt there, and an injury done to it, is soon Extended, by its intimate Sympathies, to every part of the body. In it, almost Every disease commences, and to it all our remedial Efforts are directed.

"The Stomach is probably the throne of the vital principle, from which would seem to Emanate an influence, that, diffused over the System, preserves the order of parts and sustains the vigour, tone, and well-being of the animal Economy."

Of its diseases, the one, which, from its violence as well as rarity, demands the particular attention of every medical man, is Gastritis or simple inflammation of the Stomach.

Practically unacquainted with disease

as almost every student is supposed to be, his Essay will be, rather, an Epitome of the writings and Experience of the most Eminent practitioners, than, original; which being the Case I am now to proceed to the Consideration of my Subject —

By Cullen, Gastritis has been divided into Phlegmonic and into Erysipelatous — which division has been adopted by most other nosologists, since his time. It is the former of the two, which shall occupy my attention in the following pages. the latter arises generally towards the close of other diseases, and is a certain prognostic of approaching dissolution.

Phlegmonic Gastritis may be caused by swallowing acrid or poisonous articles, by the perspiration being suddenly checked, taking a quantity of cold water into the stomach when the body is heated — Eating indigestible substances, intemperance in the use of ardent Spirits, or from

Extremes of heat and cold: it may also arise from repelled Exanthemata or misplaced gout.

According to Wilson Philip ulcerous affections of the oesophagus and fauces, may give origin to this disease, Some have attributed it to the Exhibition of drastic Cathartics or violent Emetics — but perhaps with little foundation; unless the article be given in such large doses as to act as a poison; The mechanical Causes, are, blows over the region of the stomach, or wounds of its substance. The Stomach may be sympathetically affected, by an inflammation of one or more of the abdominal viscera, Extending to it.

An attack of Gastritis, is preceded by a loss of appetite, and a sensation of oppression over the region of the stomach, a burning pain is felt in its Substance, which returns at intervals, and is often felt as low down as the false ribs or darts upwards along the back.

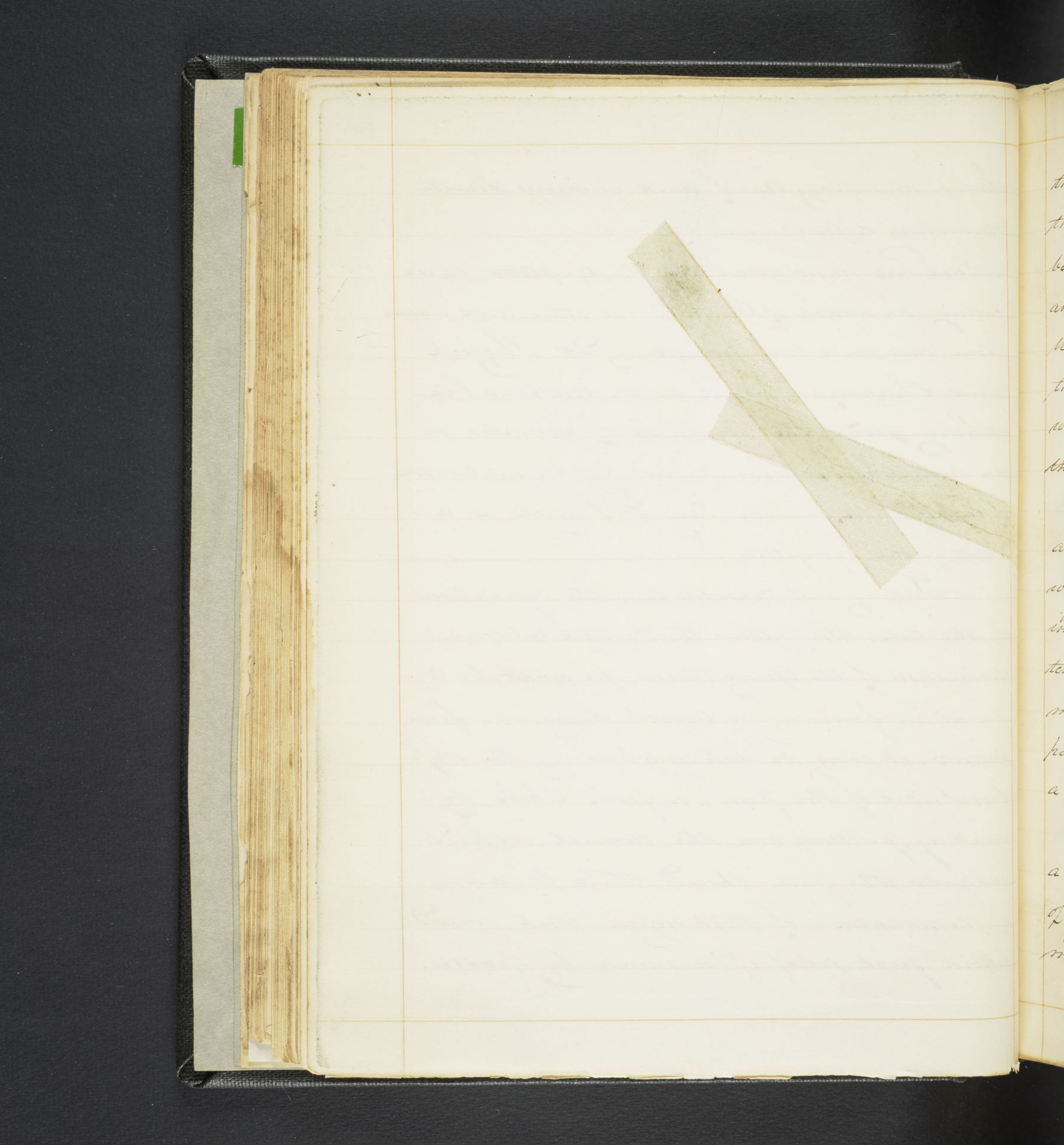
The circulation begins now to be disturbed

the mouth becomes clammy, the fauces dry, the tongue is furred, and the stomach irritable in the extreme; the Epigastrium is exceedingly painful to the touch, even so much so, as scarcely to be able to bear the bed clothes. The thirst becomes intense and the anxiety distressing - and when any fluid, even of the mildest kind, is given it is almost instantaneously ejected, the pulse in some few cases is not much affected, but will most generally be found to be chorded, small and hard - the temperature of the skin is unequal, The disease advancing, the prostration of strength is sudden and great, the diaphragm sympathizes with the inflammation of the stomach, and the breathing is hurried, the tongue cleans at the edges but remains heavily loaded in the centre, the countenance is unnatural and the aspect is bloated, the pulse now sinks, and the approach of death is announced

hiccup and singultus of dark grumous matter resembling coffee-grounds.

Such are, most generally, the symptoms indicating an attack of Gastritis, but other and anomalous ones have been noticed by Drs. Physick and Chapman, such as an intolerable itching about the pudenda of females, or an hydrophobia accompanied by an intolerance of light - the former says Dr. Physick is a most fatal symptom.

"Taking into consideration the symptoms of the case, the intense thirst, and extreme tenderness of the Epigastrium, we cannot be confused in forming a correct diagnosis - from Enteritis it may be distinguished by the different seat of the pain, or from Cholic by making pressure over the stomach, which increases the pain should there be an inflammation of that organ, but would afford great relief if occasioned by spasm,



the position of the patient, also is different in the two diseases. When the peritoneal envelope becomes phlogosed, it may be mistaken for an inflammation of that membrane, but the treatment, will in such a case be essentially the same; there is no other organ, which when inflamed prostrates the strength, as that of the stomach.

The event of Gastritis, unless the most prompt and efficacious means be employed, is always unfavourable; but should we succeed in our treatment, the disease, generally, will terminate in resolution, the pulse becoming more full and soft, and less frequent, the pain gradually ceasing, the urine depositing a sediment, and a diarrhœa supervening.

But, should the symptoms continue for a longer time, with a considerable remission of pain, a sense of weight and anxiety remaining, and the establishment of hectic

fever, we may be assured that suppuration has taken place, in which Case, unless the matter secreted be discharged either by vomiting or stool, the termination will necessarily prove fatal.

A sudden remission of pain, the pulse still retaining its frequency, but gradually increasing and becoming weaker, indicate, that gangrene has taken place — Schirrosities of the bowels are said to result from this disease, but this is denied by Dr Cullen. "they having been seldom known to have been the consequences of inflammation". Called however in time, with a good constitution to deal with, and a bold hand to practice — the physician will have little to fear.

The appearances on dissection will vary according as the disease proceeds from cold — poisons — or intemperance. what is written on this head is taken from a most valuable paper by Professor Horner — and published

in the first number of the American Journal of the Medical Sciences.

"In acute inflammation of the mucous membrane of the stomach, when the patient dies in the early stage of the disease, the bloodvessels which pass through the stomach are enlarged and distended with blood. The membrane itself is covered by a coat of mucus - which is sometimes very tenacious, varying from a limpid white to a thick purulent consistence. When this is scraped and washed away, the mucous membrane itself is brought into view, being, most frequently in the greater part of its extent of a deep red, approaching, on some occasions a crimson red, on others a purple or black; owing to an injection of the capillaries of the mucous coat: in addition we find the inflamed part interspersed with bands or patches of red, the colour of coagulated blood, being a species of Ecchymosis where the mucous membrane is softer than

natural, and seems less swollen. In cutting through all the coats, and looking at the incised edge, it will be seen, where the general and diffused redness exists, the colour is only superficial, but at the ecchymosed spots, not only the whole thickness of the mucous coat is concerned, but the corresponding part of the muscular is more highly coloured than common. When occasioned by caustics there are eschars of the mucous membrane, some of which are detatched, and leave the muscular, or even the peritoneal coat, bare, from the depth of the impression made. When however chronic inflammation has assailed the mucous coat, it is commonly thrown into numerous folds. Sometimes it is thickened, of a denser texture than natural and reddish, with irregular white patches. On other occasions, the whole of it, is red with purple spots as in Acute Gastritis. When the disease is produced by poisons - of sufficient force, ulcers are found near the pylorus and along the great curvature."

Nothing can be more settled than the Pathology of this disease. Commencing, as the inflammation most generally does, in the mucous membrane of the stomach, unless, arrested, it extends through the nervous and muscular, and rising eventually upon the peritoneal, destroys the patient.—

When the inflammation has attacked the latter coat, it may be known, by the pulse becoming hard chorded and accelerated, the pain being of a more acute nature, and is lancinating, and the tongue being covered with a white fur.—

In the treatment of Gastritis, if we take into consideration, the delicacy of the stomach, and its universal influence over the whole system, it will appear most evident, that a firm, decided, and immediate impression must be made. for this end, the Lancet stands unrivalled— "Influenced not in the

least, says Dr Chapman, by the prostration of strength, or by the feebleness of the pulse we must bleed to the extent of twenty ounces and the operation repeated – The pulse from blood letting – becomes fuller and softer. Deplete as long as inflammation remains and as much as the action of the heart will safely bear, or we shall have the extreme mortification of seeing our patient sacrificed by our timidity or carelessness –

Unless these measures promptly be made use of, the disease, after the second or third day will be so far advanced as that general depletion will be impossible –

After bloodletting has been fully premised, topical depletion, by means of leeches or cups, must be resorted to – Owing to the great Epigastric Sensibility – Cupping will be painful and more or less irritating and therefore leeches should be preferred.

But when the latter cannot be procured, scarification must be the only alternative —

After topical depletion, the whole Epigastric region is to be covered by a blister — Owing to the continual and Extreme irritability of the Stomach, the administration of internal remedies are of no avail — Our remedies are now to be introduced by the rectum — In the Commencement of the disease we are to resort to this method of opening the bowels, making use of some gentle and mild article —

Should the pain be Excessive, and our depleting remedies carried to a full Extent opium may be resorted to — but as at all times great caution must be used in prescribing this article — so here we must be circumspect in our Employment of it —

Watery Solutions of this article, constitute perhaps the safest method of administering it.

It may be combined with calomel, and afterwards followed by Castor oil.

As the disease advances, and the system begins rapidly to sink – we must resort to the most powerful stimuli, to support life – the best of these articles is the Carbonate of Ammonia and the oil of turpentine = Each suited to different cases. The latter, being more especially adapted to that state, when, from the symptoms pointed out at page 13 – we have reason to suspect that the inflammation is passing into gangrene –

The diet of our patient must be strictly an antiphlogistic, and this, not only during the actual state of disease – but for some time after every appearance of inflammation has ceased – When he will be able to retain any kind of nutriment upon his stomach – none but the

lightest and most digestible articles are to be Employed — as it respects the use of nutritive clysters, they are to be Employed in such Cases and under such Circumstances as the judgement of Each practitioner shall think most proper.

As the Consideration of the Effects of acid and poisonous articles upon the Stomach — the attending characteristic Symptoms, and the necessary treatment, would of itself occupy, more Space than the just limits of a medical thesis would permit I deem it inexpedient to take the Subject under Consideration —

I aware that there are few faults in an Essay, which are not more readily overlooked, or more promptly forgiven than that of Circumlocution and verbosity — I have Endeavoured to sum up the

history and treatment of Acute Phlegmonous Inflammation of the Stomach, as concisely and correctly – as was in my power.

How happily I have succeeded, now remains for you to decide, but with it's many imperfections I cast myself upon your liberality, and expect from you that lenient criticism, which a first attempt is, in every instance, sure to receive –

John Vaughan Smith